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**CONFIRMATION NO. 3498**

SERIAL NUMBER 10/826,990	FILING DATE 04/19/2004  RULE	CLASS 052	GROUP ART UNIT 3637	ATTORNEY DOCKET NO. 3053.2.1					
APPLICANTS  Bryan M. Buchi, West Jordan, UT;									
** CONTINUING DATA ***** <div style="text-align: center; font-family: cursive;">NINE PD</div>									
** FOREIGN APPLICATIONS ***** <div style="text-align: center; font-family: cursive;">NONE PD</div>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 06/26/2004									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; vertical-align: top;">           Foreign Priority claimed  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no            35 USC 119 (a-d) conditions met  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after            Verified and Acknowledged  <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">               Examiner's Signature           </div> <div style="text-align: center;"> <div style="font-family: cursive; font-size: 1.5em;">PD</div>              Initials           </div> </div> </td> <td style="width: 15%; vertical-align: top; text-align: center;">           STATE OR             COUNTRY UT         </td> <td style="width: 15%; vertical-align: top; text-align: center;">           SHEETS             DRAWING 5         </td> <td style="width: 15%; vertical-align: top; text-align: center;">           TOTAL             CLAIMS 20         </td> <td style="width: 10%; vertical-align: top; text-align: center;">           INDEPENDENT             CLAIMS 3         </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">               Examiner's Signature           </div> <div style="text-align: center;"> <div style="font-family: cursive; font-size: 1.5em;">PD</div>              Initials           </div> </div>	STATE OR  COUNTRY UT	SHEETS  DRAWING 5	TOTAL  CLAIMS 20	INDEPENDENT  CLAIMS 3
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ADDRESS Starkweather & Associates 9035 S 1300 E Suite 200 Sandy , UT 84094									
TITLE Window well liner									
FILING FEE  RECEIVED 385	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;">           FEES: Authority has been given in Paper            No. _____ to charge/credit DEPOSIT ACCOUNT            No. _____ for following:         </td> <td style="width: 40%; vertical-align: top;"> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees ( Filing )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees ( Issue )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____         </div> </td> </tr> </table>				FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees ( Filing )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees ( Issue )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____         </div>			
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